State Elected Officials Financial Disclosure W.S. 9-13-101 through 109

This form can be accessed on the Secretary of State's Website at: http://soswy.state.wy.us/Forms/Ethics/ElectedOfficialsEthicsDisclosureForm.pdf

In accordance with W.S. 9-13-101 - 109, each of the state's five elected officials and each member of the Wyoming legislature shall file a financial disclosure form with the Secretary of State. This includes elected officials and legislators who have not sought re-election but have served in an elected position during the previous filing period.

The financial disclosure form shall contain information current as of January 15th of each year.

As prescribed in W.S. 9-13-108(b), forms may be submitted by electronically by facsimile transmission at (307) 777.7640, or by e-mail to: **elections@wyo.gov**.

Anyone violating the provisions of the Government Ethics Act is guilty of a misdemeanor punishable upon conviction by a fine of not more than one thousand dollars (\$1,000.00). W.S. 9-13-109(a).

Violation of any provision of the Government Ethics Act constitutes sufficient cause for termination of a public employee's employment or for removal of a public official or public member from his office or position. W.S. 9-13-109(b).

FILING DEADLINE:

January 31st of each year

FILING OFFICE:

Secretary of State's Office - Election Division

2020 Carey Ave., Ste 600 Cheyenne, WY 82002

RECEIVED

E-mail: elections@wyo.gov

Fax: (307) 777.7640

JAN1 8 2019

WYOMING SECRETARY OF STATE

State Elected Official Financial Disclosure Form

Name of Official:	JoAnn Dayton Selman			
Office Held:	JoAnn Dayton Selman House of Representatives			
Senate District (if applicable):				
House District (if applicable):				
Business Address:				
Business City, State and Zip:				
Business Phone:				
Home Address:	116 Hilltop Dr			
Home City, State and	1716 Hilltop Dr 1719: Rock Springs, WY 82901			
Home Phone:	(307) 389 - 1296			

I. Offices, Directorships and Employment

(Please use additional sheets as necessary.)

Office H	feld	Name and Address of Enterprise
	directorship positions held in busi	
Name of	Enterprise	Address of Enterprise
Salaried Job Titl	Employment e	Name and Address of Enterpris

II. Sources of Income

(Please use additional sheets as necessary.)

a)	Employment Name of Employer	Address of Employer
b)	business interest (W.S. 9-13-108 (c) sta	ddresses of all business entities in which you have a tes: "Name and address of all business entities but it (10%) of the entity is owned, or sole proprietorship
	Name of Business Entity	Address of Business Entity
c)	Investments	Income Earned
	A. Any security or interest earnings	Yes No
	B. Real estate, leases, royalties	Yes No
d)	Other (describe generally):	
	Wyoming Retirement	System
On th	nis	y, 20/9, I affirm that the preceding
infor	mation is accurate.	Jo Our Nayton Selman
		Signature